Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	i on 2022	C0510			Repo Filed			CANDI	DATE	\checkmark	C	OMMITTEI	E	LOB	BYIST		
	Committee, Candida	ate or Lo	obbyist:			-		I TTEIN									
Street Address:																	
City:							State:				Zip Cod	Zip Code: 18045					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		0 DA RIMA		POST- 3. X		AMENDMENT REPORT?		Yes	N	D	\checkmark	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION				0 DA LECT		POST-	POST- 6.			TION	Yes	N	D	\checkmark
report type)	ANNUAL REPORT	7.	Year 2022					IG METHO CHECK O				PAPER		\checkmark	DISK	ETTE	
Name of Office S	Name of Office Sought by Candidate:							DATE O	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	Cour Code	
								мо	DAY	YE	AR	18	STS	REP	1		
SENATOR IN THE GENERAL ASSEMBLY								11		8	2022]	(SEE INS	TRUCTI	ONS FOR	CODES	;)
	Receipts and	мо	DAY	YEAF	2			мо	DAY	YE	AR	FO	R OFFIC	E USE	ONLY		
Expenditures	s from:		5 3	2	022	то		6		6	2022						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			(2,3	16.94)						
B. Total Monet	ary Contributions A	And Rec	eipts (Fron	n Sche	dule I)	\$			3	316.94						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			(2,0	00.00)						
D. Total Expen	ditures (From Sche	edule II	I)				\$			8,0	00.00						
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)			\$		(10,00	0.00)	_					
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II)		\$				0.00	-					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	/)			\$				0.00						
				AFF	IDA\	/IT	SE	CTION									
	s a Committee repo																
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sc	hedule	s filed o	on pa	per o	or by elect	ronic m	edium	, are to	the best of	my know	vledge	and bel	ief , tr	ue
Sworn to and subs	cribed before me this day of	5	20							s	ignatur	e of Person	Submitt	ing Rep	oort		-
	Signatur	re	-			_						Print	ed Name				-
My Commission Ex	-											Emai	I				_
	мо	D/	AY	YR					Ar	ea Cod	e	Daytime	e Teleph	one Nu	mber		_
Part II- If this is	a report of a cand	lidate's	authorized	Com	nittee,	Can	dida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of med.	ny knowle	edge and beli	ief this	politic	al co	ommi	ittee has n	ot viola	ted an	y provis	ions of the	act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subso	ribed before me this day of		20								S	ignature o	f Candida	ite			-
												Printee	d Name				-
My Commission Exp	Signature											Emai	1				_
	мо	D/	AY	YR	2				Area	Code		Da	ytime Te	elephor	e Numl	per	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** JOHN MERHOTTEIN From: <u>5/3/2022</u> **To:** 6/6/2022 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 316.94 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 316.94 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 316.94 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting Period						
JOHN MERHOTTEIN Fr			From:	<u>6/6/2022</u>					
				DATE			AMOUNT		
Full Name of Contributing Com FRIENDS OF JOHN MERHOTTE			мо	DAY	YEAR				
Mailing Address 1903 VI	NTAGE DRIVE					\$	316.94		
City EASTON	State	Zip Code (Plus 4	·) 6	6	2022				
	РА	18045							
						Γ	PAGE TOTAL		

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

316.94

\$

PART B ALL OTHER CONTRIBUTIONS \$50.01 TO \$250.00 Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part A)								
Name of Filing Committee or Candidat	e		Rep	orting P	eriod			
	From: To):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 0.00								

PART C Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ttee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

PART D ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of

over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

PART E **OTHER RECEIPTS**

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC. Use this Part to report refunds received, interest earned, returned checks and

prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate			Report	ing Perio	od				
F			From: To:						
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address	Mailing Address						\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description						•			
Enter Grand Total of Part E on Schedu	le T. Detailed Sumn	nary Page	Section	4				PAGE TO	ΓAL
		iaiy raye,	Section	7.			\$		0.00

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
JOHN MERHOTTEIN	From:	<u>5/3/2022</u> To:	<u>6/6/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate R			Reporting	g Period				
F						То:		
				DATE		АМО	UNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)	,					
Description of Contribution:								
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	porting P	eriod				
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	tion	_		
Employer Mailing Address/Principal Place of City State Business					Zip Code(Plus 4) Descrip			otion o	f Contribution	

	1
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period						
JOHN MERHOTTEIN			From	<u>6/6/2022</u>							
				DATE AMO							
To Whom Paid FRIENDS OF JOHN MERHOTTEIN				DAY	YEAR						
Mailing Address 1903 VINTAGE DRIV	/E		5	7	2022	\$	8,000.00				
CityEASTONStateZip Code (Plus 4)PA18045			Description of Expenditure								
							PAGE TOTAL				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.).			\$	8,000.00				